10.74.12.			Box Number(s)	
Application for Post Office Box™ Service Fill out all non-shaded fields, and take this application to the Post Office™.				
		This service is for (Required selection): 🗡 Business/Organization Use 🗀 Residential/Personal Use		
-	Ź.	Name of Business/Organization (Il applicable): Court had but	11huer & Shorts	
3. Name of Person Applying (Last, First, MI — Include title if representing a business/organization):			4 Company and the contract of	
-	4.	Address: Number, Street, Suite 441 Hay 27		
	٠,	cin/Tayetteville	StateGAZIP+4@30219	
	5.	Telephone Number (Include Aren Code)	6. Email Address	
		614-571-7648	PendergeASS GUEN & GMAIL, COM	
	7.	Box Size(s) (Required) See page 1 for details ☐ Size 1 ☐ Size 2	□ Size 3 □ Size 4 □ Size 5	
8. Applicant must select and enter the 1D Number for two items of valid identification listed below. You must present the IDs at a Post Office. One item a photograph and one must be traceable to the bearer (prove your physical address). Both must be current.				
	_	Select one photo ID:	Select one non-photo ID:	
	_	Exvalid driver's license or alate non-driver's ID card	☐ Current lease, mortgage, or deed of trust ☐ Voter or vehicle registration card	
١		☐ Armed forces, government, university, or recognized corporate ID ☐ Passport, passport card, alien registration card, or certificate of naturalization	☐ Voter or vehicle registration card ☐ Home or vehicle insurance golipy	
		Photo ID Number: 05/902322 12-45-593	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
10. 0		On the back of this form, list the name(s) of all individuals, including members of a business, who will be receiving mail at this (these) PO Box number(s),		
). On the back of this form, list the names of the persons or representatives of the business/organization authorized to pick up mail addressed to this (these) PO Box number(s).		
Optional Automatic Renewal Payment — Terms and Agreement (Required for 3-month payment option) By initialing below and establishing automatic renewal payments at a Post Office, I hereby authorize the U.S. Postal Service* (USPS*) to charge my credit card for the amount of my designated box size per USPS pricing on the scheduled interval I have selected (i.e., 3, 6, or 12 months). This charge could appear on my credit card statement as early as the 15th of the month prior to the due date. If I provided my email address, I understand that I will receive email notification at least 10 days prior to the actual credit card charge, I will also receive a payment due date, in my PO Box before the payment due date. I understand that I may cancel the automatic payment option any time after the initial application/payment process to complete during the business hours at the Post Office where my box is located. If I do not cancel by the 14th of the menth prior to the next payment due date, I understand that the payment cannot be transacted due to incorrect or obsolete payment information or the transaction would be extended in the payment of the account, or the bank or credit card company rejecte/returns the payment request, my PO Box may be closed on my mail received after closure would be charged a late payment fee to reactivate my PO Box service. If there are any changes to my credit card number, billip address, or expiration date, I agree to notify the Post Office where my box is located of those changes. I understand that this agreement will remain in effect until I or USPS terminates PO Box service. The USPS may receive updated credit card account information from the institution that issued the card identified for payment. If I decide to close my PO Box, I must vertee the payment agreement in the earth I provide incorrect, Inlies, or fraudulent account information on refunds.) The USPS may tempinate my participation under this automate payment agreement in the earth.				
Customer Initials 44 Billing Address (if different from address in 4 above):		1457-77-338		
	Nu	imber, Street, Suite		
Į,	City	y TRUEHEU/IK	State G.A. ZIP+4* 30 J	
		Lileblen Date: 1444 1474 Frumber of Keise 22 Collaborate Filologie for No Lily 2014 1474 Frederick Frederi		
7	tn. or	ignature of Applicant (Sand as Item 3) I certify that all information furnis uthful, and complete. I understand that anyone who furnishes false or omits information requested on this form may be subject to criminal mes and imprisonment.	misleading information on this form	

PS Form 1093, January 2012 (Page 3 of 4) 7530-02-000-7165, See our Privacy Act Statement on page 4 of this form.

Application for Post Office Box™ Service

The Postal Service™ may consider it valid evidence that a person is authorized to remove mall from the box if that person possesses a key or combination to the box.

11. Names of individuals (including members of a business) who will be receiving mail at this (these) PO Box number(s) are listed below. a. Residential/Personal Use — Each adult listed must present two forms of valid identification to the Post Office. b. Business/Organization Use — Each person listed must, upon request, present two forms of valid identification to the Post Office.	12. Persons or representatives of the business/organization who are authorized to pick up mall-addressed to this (these) PO Box number(s) are listed below. All names listed must have verifiable ID and upon request, present this identification to the Postal Service.
A parent or guardian may receive the mail of minors by listing their names (no ID is required).	
455et FINANCIAL RECOVERY, IN	- PO 1809
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THE CONTROL OF THE CO	
Valuation in the contract of t	Supply indicates the Post Office Use Only 15-15-15-15-15-15-15-15-15-15-15-15-15-1

Privacy Act Statement: Your information will be used to provide Post Office Box** service and to ensure delivery to the box. Collection is authorized by 39 U.S.C. 401, 403, and 404. Providing the information is voluntary, but, if not provided, we will be unable to provide this service to you. We do not disclose your information to third parties without your consent, except to facilitate the transaction, to act or your behalf or request, or as legally required, this includes the following limited circumstances: to a congressional office on your behalf; to moscial entities regarding financial transaction issues; to a U.S. Postal Service* auditor; to

entitles, including law enforcement, as required by law or in legal proceedings; to contractors and other entitles alding us to fulfill the service (service providers); to process servers; to domestic government agency for violations and alleged violations of law, information concerning an individual box holder who has filed a protective court order with the postmaster will not be disclosed except pursuant to court order. For more information regarding our privacy policies.

"2011 United States Postal Service". All Rights Reserved. The Eagle Logo, PO Box and Your Other Address are some of the many trademarks of the U.S. Postal Service".